

***SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
BUDGET REQUEST CONSIDERATIONS FOR FY 2010 – 2011***

<u>Program Needs</u>	<u>Description</u>	<u>DDSN Request State Funds</u>	<u>House of Representatives</u>
1. Annualization of Recurring Services Funded By Proviso 90.13 DHHS Funding – Medicaid Stimulus	This request is to annualize the non-recurring funding provided DDSN in the FY 2009-2010 Appropriations Act for ongoing services to individual consumers and families.	\$17,235,491	
2. Community Supports in the Individual's and Family's Home	This request is to prevent unnecessary and expensive out-of-home placements by serving 1,010 individuals with severe disabilities with the supports necessary to maintain them in their homes. As of June 30, 2009, there were 1,697 consumers on the waiting list for the Mental Retardation/Related Disabilities Waiver and 301 awaiting the Head & Spinal Cord Injury Waiver for 1,998 individuals. There were also 1,120 awaiting a day support service.	\$2,354,800	
3. Traumatic Brain or Spinal Cord Injury Post-acute Rehabilitation	South Carolina needs to fully fund over time the remaining cost of post-acute rehabilitation that enables people with traumatic brain or spinal cord injuries to obtain an appropriate level of specialized rehabilitation after the injury and acute hospital stay. Currently in the state, there is a serious gap in access to post-acute rehabilitation that is specialized for traumatic brain or spinal cord injuries. The estimates based on hospital discharges are that 2,254 individuals with traumatic brain or spinal cord injuries this year will be in need of specialized post-acute inpatient/outpatient rehabilitation. The total cost of care would be \$68 million; however, \$56.5 million of this expense could be covered by private insurance, Medicare and other government reimbursements. This fiscal year, DDSN will have \$1,650,000 in one-time funding for this program. The State funding needed for the balance to cover the uninsured/underinsured and Medicaid State matching funds would be \$9,854,000 if the one-time funds are annualized. Due to the amount of funding needed, DDSN is requesting \$3,000,000 in funding at this time.	\$3,000,000	
4. Maintenance of Effort to Cover Consumers' Cost of Care	This request represents the need to provide sufficient funding as a maintenance of effort to the providers of services so that the actual cost of care can be covered. If the state's reimbursement rates do not cover the actual cost of care, eventually the local entities will have to reduce the scope and quality of care below acceptable standards, eliminate the services for which there is insufficient funding, or stop providing services. In the last three years the costs have risen with increasing cost of gasoline, oil, electricity, food, medical professionals, and other goods and services by an average of 6.3 percent. All providers are now at the point that reimbursements must be increased to cover the additional operating costs which have risen significantly. With \$82.8 million in operating expenses, the inflationary cost for the State funded portion is \$2,190,500.	\$2,190,500	
<u>House Budget Reductions:</u>			
• 28% Base Budget Reduction	DDSN's base State funds was \$150,839,580 as of January 1, 2010. The House budget version reduces the recurring base by 28%, down to \$108,539,580.		-\$42,300,000
• \$17.2 Million of one-time funds	\$17,235,491 in matchable one-time funds is currently being used by DDSN to fund ongoing services. DDSN's request (No. 1) above was for annualization of these non-recurring funds.		-\$17,235,491
<u>House Budget Appropriations:</u>			
• Proviso 90.18 DHHS Funding of one-time funds	The amount of matchable State funds necessary to maintain ARRA compliance.		\$50,535,491
• Proviso 90.18 DHHS Funding of one-time funds earmarked for Early Intervention for At-Risk 3-5 year old children	Restores Early Intervention Services (Family Training/Service Coordination) reduced or eliminated due to December 2009 across-the-board reduction to over 600 At-Risk 3-5 year old children.		\$1,250,000
• Part IV Enhanced Federal Medical Assistance Percentage (FMAP) - one-time funds	Amount of State funds required to maintain March 1, 2010 service levels. These services include Day Program services for 150 adults, 96 beds for individuals in crisis, Early Intervention services for 480 children, in-home support services including respite and stipends for over 1,500 individuals and all waivers and the TBI/SCI post-acute rehabilitation program to March 1 capacities.		\$9,000,000